

# **EARLY CHILDHOOD CHILD CARE QUALITY ENHANCEMENT AWARDS FY11**

The purpose of Montgomery County Early Childhood Child Care Quality Enhancements Awards is to provide early childhood professionals working in the child care field the opportunity to further their education or to seek accreditation of their child care site. Both center based and family child care providers are welcome to apply.

## **TO BE ELIGIBLE FOR ALL ECCCQE AWARDS YOU MUST:**

1. Work a minimum of 20 hours a week in a registered/licensed child care program in Montgomery County. Applicants must be a registered family child care provider or an employee in a registered family child care program or licensed child care center.
2. Complete and submit the Early Childhood Child Care Quality Enhancement Application which consists of:
  - **Form A:** “Child Care Quality Enhancements Award Application”
  - **Form B:** “Child Care Quality Enhancement Award Provider Affidavit” signed by director **and** applicant.
  - **Form C:** “Statement of Commitment” signed and dated by the applicant.
3. Successfully complete the class for which you have received a scholarship with a passing grade of A, B, or C.
4. Submit a new application for each award request by stated deadline.
5. Participate in the Maryland Child Care Credential Program.
6. Submit proof of payment such as: detailed receipt, cancelled check, or credit card statement to obtain reimbursements.

**\*\*Please note that all applications will be evaluated on an individual basis.**

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## **Types of Awards**

### **\*Scholarship to attend Montgomery College or other approved Higher Education Institution:**

Applicants are eligible for a \$600 scholarship for an approved 3-credit class or an \$800 scholarship for an approved 5-credit class each semester paid directly to your Montgomery College student account to pay for credit courses and student fees. The remaining money will be returned to the student directly in form of a check from Montgomery College Office of Student Financial Aid to help pay for books, transportation, substitutes or other expenses related to coursework.

All applicants must:

- Complete and submit forms A, B and C by the specified deadline.
- Complete the “Montgomery College Foundation Scholarship Application” each school year (July 1- June 30).
- Complete the FAFSA (Free Application for Federal Student Aid) at <http://www.fafsa.ed.gov/> or by calling 1-800-4-FED-AID (1-800-433-3243).
- In addition, we recommend that you apply for the MSDE Professional Development Fund. For more information please contact Montgomery College at 240-567-1757.
- Be enrolled in Montgomery College and declare your major as Early Childhood Education pursuing a Early Childhood Education Certificate, or Associates of Applied Science in Early Childhood Education (A.A.S.) or a Teacher Education Transfer Program (A.A.T.) in Early Childhood Education with the intent to pursue a 4-year degree in Early Childhood Education.
- Be registered for credit classes at Montgomery College.
- Maintain a GPA of 2.0 (“C” average) or higher.
- Received a passing grade for the last class for which you have received an ECI scholarship.
- A maximum of \$1,600.00 will be awarded per student per fiscal year.

**\*Reimbursement for Center Accreditation:**

Directors/owners seeking center accreditation through MSDE, NAA, NAEYC or NECPA, are eligible for reimbursement.

- Complete and submit forms A, B and C.
- Program must meet accrediting bodies' eligibility requirements.
- A program improvement plan is required for those pursuing MSDE accreditation. Match items purchased with indicator/standard on program improvement plan.
- A maximum of \$1,500.00 will be awarded per program per fiscal year.

**\*Reimbursement for National Association for Family Child Care Accreditation:**

- Complete and submit forms A, B and C.
- Providers seeking funds must meet NAFCC accreditation eligibility requirements in order to access reimbursement for the application fee and observation visit.
- A maximum of \$950.00 (1 adult) or \$1,050.00 (2 adults) will be awarded per program.

**\*Reimbursement of Child Development Associate Credential: Assessment, Renewal, and Prep Course:**

- All applicants must complete and submit forms A, B and C.
- Submit a CDA preparatory course certificate of completion from approved agencies or copy of CDA credential certificate.
- Applicants must meet CDA eligibility requirements.
- Reimbursement will only be offered for one CDA credential per person.
- A maximum of \$375 for CDA preparatory class, \$325 for CDA Assessment fee and \$50 renewal fee will be awarded per applicant.
- As funds permit, a maximum reimbursement of \$700 will be given for the 90 hour preschool course upon receipt of the CDA Credential.

**\*Reimbursement of Evaluation of Foreign Credentials:**

- Complete and submit forms A, B and C.
- Submit a copy of the evaluated credentials and original invoice showing the paid fees, (cancelled check, or credit card statement made out to the company providing the service).
- Applicants are required to use one of the evaluating agencies listed below.
- A one time maximum of a \$160.00 will be awarded per applicant.

**Sources for Evaluation of Foreign Credentials:**

World Education Services, Inc.  
P O Box 57206  
Washington, DC 20037-7206  
Tel: 202-331-2925 - 800-937-3897  
Fax: 202-331-2927 - [dc@wes.org](mailto:dc@wes.org)

Josef Silny & Associates  
7101 SW 102 Avenue Miami, FL 33171  
Tel: 305-273-1616  
Fax: 305-273-1338  
Translation Fax: 305-273-1984  
[info@jsilny.com](mailto:info@jsilny.com)  
[www.jsilny.com](http://www.jsilny.com)

Montgomery County Early Childhood Services  
**EARLY CHILDHOOD CHILD CARE QUALITY ENHANCEMENTS AWARD  
APPLICATION FY10**

Please complete the following questions:

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_

Languages spoken other than English: \_\_\_\_\_

E-mail address: \_\_\_\_\_ M Number: \_\_\_\_\_  
(Montgomery College Student ID Number)

**Please tell us about your work experience:**

Where do you work? \_\_\_\_\_

How long have you been there? \_\_\_\_\_ Months \_\_\_\_\_ Years

What is your position? ☐ Teacher ☐ Assistant ☐ Aid ☐ Director ☐ FCC Provider

Are you receiving any other scholarship assistance? ☐ Yes ☐ No

**Please check only one of the following scholarship awards you are applying for:**

**HIGHER EDUCATION DEGREE:**

☐ Montgomery College credit course name and number \_\_\_\_\_  
Semester: ☐ Fall ☐ Spring

☐ Other Higher Education Institution credit course name and number and school name \_\_\_\_\_  
Semester: ☐ Fall ☐ Spring

☐ Evaluation of Foreign Credentials

**CDA CREDENTIAL:**

- ☐ Montgomery Child Care Association Training Institute CDA Prep Course  
☐ Instituto de Educación Infantil CDA Prep Course  
☐ Montgomery College Workforce Development & Continuing Education CDA Prep Class  
☐ Howard University, Takoma Park Campus CDA Prep Course  
☐ CDA assessment fee (Achievers Only)  
☐ CDA renewal fee (Achievers Only)  
☐ Other approved formal CDA training (after receiving CDA credential)

**PROGRAM ACCREDITATION:**

☐ MSDE ☐ NAA ☐ NAEYC ☐ NAFCC ☐ NECPA

**\*\*Please note that all applications will be evaluated on an individual basis.**

Please mail this application to:

**Jody Burghardt**  
**Professional Development Coordinator**

**332 West Edmonston Drive**

**Rockville, Maryland 20852**

240-777-3249 (phone); 301-279-1812 (fax)

**EARLY CHILDHOOD CHILD CARE QUALITY ENHANCEMENTS FY10  
AWARD PROVIDER AFFIDAVIT**

**To be completed by the applicant:**

Applicant Name: \_\_\_\_\_

I, \_\_\_\_\_, certify that I am employed in child care at least twenty hours per week and wish to apply for a Quality Enhancement Scholarship Award. I understand that I must meet the eligibility criteria required by the college, training institute or accreditation system that I choose.

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date

**To be completed by center Director or family child care owner:**

Center or Family Child Care Name: \_\_\_\_\_

Director's Name: \_\_\_\_\_

Address: \_\_\_\_\_

License #: \_\_\_\_\_ or Registration #: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Does your program accept child care subsidy as a form of payment? (POC/WPA/Military)

☐ Yes ☐ No

If yes, how many children using the subsidy are you currently serving? \_\_\_\_\_

Does your program accept children with special needs? ☐ Yes ☐ No

If yes, how many children with special needs are you currently serving? \_\_\_\_\_

I hereby affirm that the above person is currently working twenty hours a week or more at the above mentioned site. I support and recommend this person to continue their professional development through this scholarship award process. I understand that the scholarship award status is based on the candidate's eligibility requirements and successful completion of coursework. I understand that the scholarship award can be denied or revoked in the case of default by candidate.

\_\_\_\_\_  
Director or Family Child Care Owner's  
Signature

\_\_\_\_\_  
Date

**\*\*Please note that all applications will be evaluated on an individual basis.**

***Scholarships will be awarded without consideration of race, creed, religion or national origin.***

**FORM "B"**

## EARLY CHILDHOOD CHILD CARE QUALITY ENHANCEMENT AWARD FY10

### To be completed by the applicant:

Do you participate in the Maryland Child Care Credential program? ☐ Yes ☐ No

If so, what level do you currently hold? \_\_\_\_\_

Have you applied for our scholarship in the past? ☐ Yes ☐ No

If yes, what was your scholarship award used for?

☐ Higher Education ☐ CDA ☐ Accreditation ☐ Evaluation of Foreign Credentials

Have you completed the application for FAFSA (Free Application for Federal Student Aid)?

☐ Yes ☐ No

Have you applied for state scholarship funding (the MSDE Professional Development Fund)?

☐ Yes ☐ No

Do you have a degree from a college/university? ☐ No

☐ Yes: ☐ 1 Year Certificate ☐ AA ☐ BA ☐ MA ☐ PhD

What is your degree in? \_\_\_\_\_

### Statement of Commitment

I \_\_\_\_\_, affirm that all of the information on this application is true and

(print your name)

accurate to the best of my knowledge. I understand that any false statement on this application may result in it being rejected. By accepting this award, I understand that I am making a commitment to continue to work in child care in Montgomery County for at least one year from the date of course completion or reimbursement. If this commitment is not fulfilled I will be subject to repayment of scholarship award(s). I also understand that I may be excluded from accessing future scholarship funds by failing to successfully pass the course or by dropping a college course. As a condition of program participation I commit to serve as a mentor for others. (Mentoring could be in the form of CDA advisor, or peer support to those pursuing credentialing, accreditation, and or higher education degree). I also commit to participating in the Maryland Child Care Credential program and renewing my credential upon continuation of scholarship support. In addition, I commit to keep all my information current and accurate.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date